

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 29 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N21508 (9)**  
1. Corporation Name  
**SEVILLA CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>1800 SEVILLA BLVD. ATLANTIC BEACH FL 32233</b>	Mailing Address <b>1800 SEVILLA BLVD. ATLANTIC BEACH FL 32233</b>
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3. Date Incorporated or Qualified  
**07/09/1987**

4. FEI Number <b>59-2146076</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  
 Yes  No

9. Name and Address of Current Registered Agent  
**ROGOSHESKE, KENENTH C.  
1810 SEVILLA BLVD  
SUITE 308  
ATLANTIC BEACH FL 32233**

10. Name and Address of New Registered Agent

81 Name <b>David Breckinridge</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>1810 Sevilla Blvd.</b>
83 <b>Suite 105</b>
84 City <b>Atlantic Beach</b>
85 Zip Code <b>FL 32233</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *David Breckinridge* **David Breckinridge, Treasurer** **4/20/98**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE <b>PD</b>	<b>MARTIN, G.E.</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>1810 SEVILLA BLVD. STE 204</b>	
STREET ADDRESS	<b>ATLANTIC BEACH FL</b>	
CITY - ST - ZIP		
TITLE <b>VD</b>	<b>MULLINS, HAROLD E.</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>1810 SEVILLA BLVD. STE 203</b>	
STREET ADDRESS	<b>ATLANTIC BEACH FL</b>	
CITY - ST - ZIP		
TITLE <b>SD</b>	<b>BRUMBACH, BARBARA C</b>	<input type="checkbox"/> DELETE
NAME	<b>1830 SEVILLA BLVD #309</b>	
STREET ADDRESS	<b>ATLANTIC BEACH FL 32233</b>	
CITY - ST - ZIP		
TITLE <b>TD</b>	<b>ROGOSHESKE, KENNETH C.</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>1810 SEVILLA BLVD #308</b>	
STREET ADDRESS	<b>ATLANTIC BEACH FL</b>	
CITY - ST - ZIP		
TITLE <b>AD</b>	<b>LIBERTY, WILLIAM</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>1820 SEVILLA BLVD #310</b>	
STREET ADDRESS	<b>ATLANTIC BEACH FL</b>	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <b>President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME <b>Charles L. Nicholson</b>	
1.3 STREET ADDRESS <b>1830 Sevilla Blvd. Ste 209</b>	
1.4 CITY - ST - ZIP <b>Atlantic Beach, FL 32233</b>	
2.1 TITLE <b>Vice President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME <b>Robert W. Croft</b>	
2.3 STREET ADDRESS <b>1830 Sevilla Blvd. Ste 109</b>	
2.4 CITY - ST - ZIP <b>Atlantic Beach FL 32233</b>	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE <b>Treasurer</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME <b>David Breckinridge</b>	
4.3 STREET ADDRESS <b>1810 Sevilla Blvd. Ste 105</b>	
4.4 CITY - ST - ZIP <b>Atlantic Beach FL 32233</b>	
5.1 TITLE <b>Asst. Treasurer</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME <b>Virginia Breckinridge</b>	
5.3 STREET ADDRESS <b>1810 Sevilla Blvd. Ste 105</b>	
5.4 CITY - ST - ZIP <b>Atlantic Beach FL 32233</b>	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Barbara C. Brumbach* **BARBARA C. BRUMBACH, SECRETARY** **4-20-98**

CR2E037 (10/97)